

# Work First/Child Protective Services Substance Abuse Initiative

LME Directors Meeting 7/13/07

NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services

**NC** Department of Health and Human Services



#### Overview

#### Introduction to WF/CPS/SA Initiative

- Need
- Legislation
- Policy & Procedures
- SA QP Role
- Current status

#### Updates & News

- Medicaid Billing
- Technical Assistance & Training
- Policy Review & Development
- Web based reporting and resources
- Needs Assessment: LMEs, QPs & DSSs input



#### WF/SA/CPS Initiative: Goal

 Early identification of substance abuse disorders or mental illness that will affect the Work First consumer's ability to secure and maintain employment or the Child Protective Services consumer's ability to safely & successfully parent.





# What is the Need?: Substance Abuse & TANF



- 1997: An estimated
   5% to 35% of TANF
   recipients are
   expected to require
   treatment for alcohol
   or other drug
   problems in order to
   get and keep a job.
- 2007: Up to 50%??
   Based on anecdotal reports of current caseload



## What is the Need?: Substance Abuse & Child Welfare

 Currently, caretaker substance abuse is the primary contributing factor in 24% of all substantiated or finding of need for services child protective services cases in North Carolina.

 Nationally, approximately 60% to 75% of children involved in the child welfare system are impacted by a parent's drug or alcohol use.



#### Legislation

 General Statute 108A-29.1 Substance
 Abuse Treatment Required: Drug Testing for Work First Program Recipients

 General Statute 108A-25.2 Exemption from limitations for individuals convicted of certain drug related felonies



# Policy & Procedures: WF CPS/SA Initiative

- Each LME receives funding for 1 to 4 FTE SA QPs
- \$40,000 in SAPTBG funds are allocated for each FTE SA QP position
- Positions are co-located at the local DSS, when possible
- Local MOA between the LME and the local DSS(s) to identify responsibilities of each agency



# Policies & Procedures: Work First Consumers

Completion of Treatment

Engagement in Treatment

**QP** in **SA** refers to Treatment

**Assessment** 

Referral to QP in SA for Assessment

Intake & Screening by DSS

- DSS Screenings:
  - All TANF applicants/recipients
  - AUDIT/DAST-10
  - SA Behavioral Indicator Checklist
- QP Assessment:
  - Substance Use Disorders
     Diagnostic Schedule (SUDDS-4)
  - Determines treatment need and eligibility
  - Voluntary MH Screening
- Collaboration Necessary:
  - WF Case Worker
  - WF/CPS QP
  - SA Treatment Provider



## Policies & Procedures: Child Protective Services Consumers

#### Two clocks:

- Adoption & SafeFamilies Actpermanency planning
- Recovery time
- Collaboration necessary:
  - CPS social worker
  - SA Qualified
     Professional
  - Substance abuse treatment provider

CPS assessment results in substantiation or finding that family is in need of services Substance abuse is identified as one of the reasons a child was maltreated Referral to a SA Professional for assessment SA Professional refers to treatment Substance abuse treatment recommendations are included in Family Services Agreement



## Policy & Procedures: Target Populations

Adult Substance Abuse Women (ASWOM)

 Adult Substance Abuse DSS Involved (ASDSS)



## Work First CPS /SA Initiative: Role of the SA Qualified Professional

- Initial screening
- Diagnostic interview
- Ensuring random toxicology screens are administered during treatment
- Providing case consultation with DSS staff
- Providing orientation to the WF/CPS/SA Initiative for WF consumers



## Work First CPS/SA Initiative: Role of the SA Qualified Professional

- Providing training for DSS staff (i.e. screening)
- Data collection
  - WF/SA Initiative Reporting Form
  - NCTOPPS
- Providing coordination including:
  - Consumer advocacy relating to WF/SA Initiative
  - Referral for treatment
  - Ensuring transportation and child care, provided by county DSS, are available to enable a consumer to receive SA services



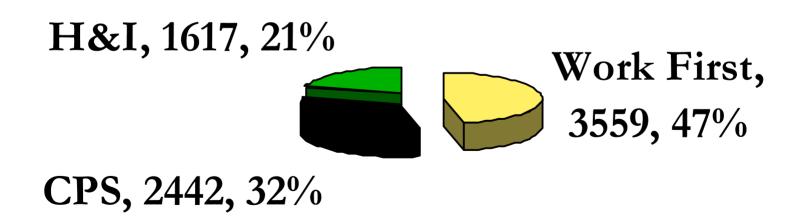
## Work First CPS /SA Initiative: Role of the SA Qualified Professional

- Tracking the provision of consumer services relevant to WF participation
- Following up with treatment providers
- Reporting to county DSS information that relates to the Mutual Responsibility Agreement with signed consent
- Interagency staffing with county DSS
- Acting as liaison between the LME/Designated Provider &/or other treatment providers & the county DSS.



## Quarterly Reports: July 1, 2006 – March 31, 2007: Eligibility

 Work First referrals were the largest group of consumers served by QPs in the first three quarters of SFY2006 – 2007.





## Quarterly Reports: 7/1/06 – 3/31/07: Trend in persons served statewide

- Over the nine month period:
  - Work First referrals declined.
  - Referrals from CPS & for Class H & I felons increased.





## WF/CPS/SA Initiative: New Directions





# Future Directions: Maximizing Resources

### A Reminder:

WF Cash Assistance Recipients are

### **MEDICAID ELIGIBLE**



# Future Directions: Medicaid Billing

- Work First referrals who meet medical necessity are eligible for Enhanced Benefit Services
- For example, WF QP can provide:
  - Clinical Assessment (with required credentials)
  - Community Support Services



# Future Directions: Technical Assistance & Training

- State Level Point of Contact
  - Telephone and On-site Technical Assistance

 Statewide &/or Regional Meetings with LMEs, QPs & DSS staff

 Trainings Based on Survey & Focus Group Feedback



# Future Directions: Policy Review and Development

- Division of Social Services reviewing current WF/SA Policy
  - Developing policy to address confidentiality related issues at the local level
  - Developing policy to regarding CPS referrals to QPs in the initiative



# Future Directions: Web Based Reporting

QSAP enters
Monthly data for
self monitoring
& review by LME



LME submits data electronically to Division for Quarterly Report

- Permit QPs, LMEs, and DMH/DD/SA to monitor program more accurately and effectively.
- More specific data, reported in 'real time'
- Compare LME data to others across the state.



#### Future Directions: Needs Assessment

- LME & QP input:
- What do YOU need to better serve Work
   First and CPS consumers?
  - Resources?
  - Trainings?
  - Communication with other QPs in the Initiative?
  - Focus groups
  - Survey



# Substance Abuse Treatment Resources

#### **NC Family Health Resource Line**

#### Substance Use Specialist

- 1-800-FOR-BABY
- Capacity management for residential beds statewide for pregnant and parenting women:

Perinatal and Maternal Residential Services & CASAWORKS for Families Residential Initiative